

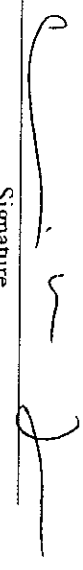
LCP-ARI

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Formal for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

Report for the reporting period 3/1/2010 to 6/30/10

interview

1. Name of Labor Compliance Program (LCP): San Diego Union High School District	
2. LCP I.D. Number (assigned by DIR): 2003.00093	3. Date of Initial Approval: 3/27/2003
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Christina Bennett, Director of Purchasing, 710 Encinitas Blvd., Encinitas, CA 92024; PH: 760-753-6491; christina.bennett@sduhsd.net	
5. Did LCP perform any LC § 1771.5 enforcement activities during the 4 months in the reporting period? Please check one: <input checked="" type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input type="checkbox"/> No If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102	
What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary) N/A	
SUBMITTED BY:  Signature <u>Christina M. Bennett, Director of Purchasing</u> Name and Title <u>8/10/10</u> Date	

6. LC § 1771.5 enforcement activities (provide all information requested, attaching as many sheets as necessary).

A. List projects handled by LCP within the past 12 months.

Project Name	Bid Advertisement Date	Prime Contractor	Contract Amount
San Diegoito Academy Visual & Performing Arts Center	April 5, 2010	Barnhart Balfour-Beatty, Inc.	\$7,316,595.43
Total			\$7,316,595.43

B. Summary of all wages and penalties assessed and/or recovered.

[illegible]

Total					
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Project Name	Amount Assessed	Amount Recovered	Explanation
Total			

[illegible]

Project Name	Contractor	Nature of Violation	ODL Case #	Current Status

Please check one: ☐ Yes ☒ No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

Please check one: ☐ Yes ☒ No

If yes, identify affected contractor(s) or subcontractor(s) and date(s) of referral: _____

LCP-AR1

Department of Industrial Relations
San Francisco, CA 94102-5004
(415) 774-2000

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